

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

LIBERTARIAN NATIONAL COMMITTEE, INC.

ADDRESS (number and street)

1444 DUKE STREET

Check if different
than previously
reported. (ACC)

ALEXANDRIA

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00255695

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☒ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
01 01 2019

through

M M M / D D D / Y Y Y Y Y Y
01 31 2019

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Hagan, Timothy, R., Mr.,

Type or Print Name of Treasurer

Signature of Treasurer

Hagan, Timothy, R., Mr.,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
02 20 2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

LIBERTARIAN NATIONAL COMMITTEE, INC.

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 01 / 01 / 2019 To: M M / D D / Y Y Y Y Y Y 01 / 31 / 2019

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2019		13728.12
(b) Cash on Hand at Beginning of Reporting Period.....	13728.12	
(c) Total Receipts (from Line 19)	175964.00	175964.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	189692.12	189692.12
7. Total Disbursements (from Line 31).....	162214.61	162214.61
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	27477.51	27477.51
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	76028.44	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

LIBERTARIAN NATIONAL COMMITTEE, INC.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	9

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	91392.00	91392.00
(ii) Unitemized	76347.00	76347.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	167739.00	167739.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	167739.00	167739.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	8225.00	8225.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	175964.00	175964.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	175964.00	175964.00

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	162214.61	162214.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	162214.61	162214.61
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	162214.61	162214.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	162214.61	162214.61

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	167739.00	167739.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	167739.00	167739.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	162214.61	162214.61
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	162214.61	162214.61

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFH'ZG7 <98I @ 'CF' +H9A-N5H-CB

Form/Schedule: F3XN

Transaction ID :

The Committee wishes to disclose the following: 1) No expenditures designated on Schedule B supporting Line 21b were made on behalf of any specifically identified federal candidate(s). 2) The Libertarian National Committee (LNC) requests address, employer, and occupation information from all contributors whose yearly aggregate contributions exceed \$200.00 and informs them of the requirement of complying with 11 CFR 104.7(b)(1). In the event that the information is not supplied as a result of the initial request, Committee makes a subsequent attempt to collect the information by mail, email, or telephone contact within 30 days of the initial contribution. This 'follow up' request a) clearly asks for the missing information without requesting a contribution, b) informs the contributor of the requirements for reporting such information under federal law, and c) is enclosed with a pre-addressed envelope when sent by postal mail. If the information is submitted after the initial monthly report is filed, the contributor master file is updated and the information is updated in memo entries filed with the next regularly scheduled report. The Committee also makes periodic requests during the year for all contributors to update their contact information and for contributors whose yearly contributions aggregate to more than \$200 to update their Employer/Occupation information.

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 98

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Barclay, Anthony, , ,

Mailing Address 6636 Gran Via Dr NE

City
Rockford

State
MI

Zip Code
49341-9691

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Radiology Muskegon PC

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 21 / 2019

Transaction ID : SA11AI.95138

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Beaulieu, Chris, R., ,

Mailing Address 11701 Central Park Way Apt 1277

City
Maple Grove

State
MN

Zip Code
55369-3123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Softeon

Occupation (for Individual)
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 04 / 2019

Transaction ID : SA11AI.95170

Amount of Each Receipt this Period

1500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Beavers, Anthony, , ,

Mailing Address 695 Burns Ave

City
Altoona

State
PA

Zip Code
16601-9126

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Hampton Tedder Technical Services

Occupation (for Individual)
Test Supervisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 01 / 2019

Transaction ID : SA11AI.95173

Amount of Each Receipt this Period

2500.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

4250.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 98

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Beavers, Anthony, , ,

Mailing Address 695 Burns Ave

City
AltoonaState
PAZip Code
16601-9126FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Hampton Tedder Technical ServicesOccupation (for Individual)
Test Supervisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2596.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
01 / 04 / 2019

Transaction ID : SA11AI.95174

Amount of Each Receipt this Period

96.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Benson, Ronald, R., Mr.,

Mailing Address PO Box 16456

City
Chapel HillState
NCZip Code
27516-6456FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Chapel Hill highOccupation (for Individual)
Coach

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
01 / 08 / 2019

Transaction ID : SA11AI.95210

Amount of Each Receipt this Period

206.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Borland, Lawrence, M., Dr.,

Mailing Address 3915 Bridgewood Cir

City
MurrysvilleState
PAZip Code
15668-9478FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
01 / 10 / 2019

Transaction ID : SA11AI.95274

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

552.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 98

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Clinard, Frank, W., Mr., Jr.

Mailing Address 301 Griffin St

City
Santa Fe

State
NM

Zip Code
87501-1822

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 16 / 2019

Transaction ID : SA11AI.95472

Amount of Each Receipt this Period

33900.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cook, Curtis, A., Mr.,

Mailing Address 19051 86th Ave NE

City
Bothell

State
WA

Zip Code
98011-2111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Peak Systems, Inc.

Occupation (for Individual)

Technician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 08 / 2019

Transaction ID : SA11AI.95509

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Craig, Daniel, A., Dr.,

Mailing Address 872 Fox Valley Place SW

City
Rochester

State
MN

Zip Code
55902

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Mayo Clinic

Occupation (for Individual)

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 31 / 2019

Transaction ID : SA11AI.95535

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

34650.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 98

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Daugherty, Lauren, , ,

Mailing Address 5236 Lake Shore Dr

City
WacoState
TXZip Code
76710-1733FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LNCOccupation (for Individual)
Political Organizer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 15 / 2019

Transaction ID : SA11AI.95582

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Daugherty, Lauren, , ,

Mailing Address 5236 Lake Shore Dr

City
WacoState
TXZip Code
76710-1733FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LNCOccupation (for Individual)
Political Organizer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 23 / 2019

Transaction ID : SA11AI.95583

Amount of Each Receipt this Period

50.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Demarest, David, Pratt, ,

Mailing Address 10812 Park Meadows Plz # 133

City
OmahaState
NEZip Code
68142-1120FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Roads to Freedom FoundationOccupation (for Individual)
Founder, CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 18 / 2019

Transaction ID : SA11AI.95622

Amount of Each Receipt this Period

220.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

520.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 98

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Desrosiers, Jason, , ,

Mailing Address 4450 Galore Ave

City
Las Vegas

State
NV

Zip Code
89115-2453

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Sams Town

Occupation (for Individual)

Sports Book Supervisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 15 / 2019

Transaction ID : SA11AI.95628

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dyer, Mitchell, E., ,

Mailing Address 122 Old Bridge St

City
Pelham

State
NH

Zip Code
03076-5705

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 03 / 2019

Transaction ID : SA11AI.95694

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Easton, Ben, N., Mr.,

Mailing Address 2600 Lake Austin Blvd Apt 2301

City
Austin

State
TX

Zip Code
78703-4441

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Eans ISD

Occupation (for Individual)

Teacher-substitute

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 02 / 2019

Transaction ID : SA11AI.95697

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gilmore, Suzanne, , Ms.,

Mailing Address PO Box 558694

City
Miami

State
FL

Zip Code
33255-8694

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
01 / 21 / 2019

Transaction ID : SA11AI.95938

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Goward, Sean, L., ,

Mailing Address 19 W Inner Cir

City
Dover

State
DE

Zip Code
19904-6001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Diamondback Signal

Occupation (for Individual)
Signalman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY
01 / 15 / 2019

Transaction ID : SA11AI.95978

Amount of Each Receipt this Period

600.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Goward, Sean, L., ,

Mailing Address 19 W Inner Cir

City
Dover

State
DE

Zip Code
19904-6001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Diamondback Signal

Occupation (for Individual)
Signalman

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

MM / DD / YYYY
01 / 23 / 2019

Transaction ID : SA11AI.95979

Amount of Each Receipt this Period

300.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hancock, Douglas, Cecil, Mr.,

Mailing Address PO Box 543

City
WayneState
ILZip Code
60184-0543FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 28 / 2019

Transaction ID : SA11AI.96061

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Harris, James, , ,

Mailing Address PO Box 1162

City
FentonState
MIZip Code
48430-5162FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 04 / 2019

Transaction ID : SA11AI.96077

Amount of Each Receipt this Period

1500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hayes, Daniel, E., ,

Mailing Address 405 Bengal Rd

City
River RidgeState
LAZip Code
70123-5420FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Massage Therapist/Ride Share Driver

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 30 / 2019

Transaction ID : SA11AI.96106

Amount of Each Receipt this Period

70.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

1720.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Heeney, Colleen, C., ,

Mailing Address 888 SW Dekle Rd

City
Lake City

State
FL

Zip Code
32024-1925

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
State of Florida

Occupation (for Individual)
Lobbyist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 02 / 2019

Transaction ID : SA11AI.96116

Amount of Each Receipt this Period

1500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Heeney, Colleen, C., ,

Mailing Address 888 SW Dekle Rd

City
Lake City

State
FL

Zip Code
32024-1925

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
State of Florida

Occupation (for Individual)
Lobbyist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1560.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 14 / 2019

Transaction ID : SA11AI.96117

Amount of Each Receipt this Period

60.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hirsch, Robert, , ,

Mailing Address 505 N Lake Shore Dr Apt 5910

City
Chicago

State
IL

Zip Code
60611-3411

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Gold Eagle Co.

Occupation (for Individual)
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 16 / 2019

Transaction ID : SA11AI.96170

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1810.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Horton, Duane, M, Mr.,

Mailing Address 74 Willow Ln

City
Portsmouth

State
RI

Zip Code
02871-1601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Uncle Sam

Occupation (for Individual)

taxpayer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 30 / 2019

Transaction ID : SA11AI.96202

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Inks, John, M., Mr., Jr.

Mailing Address 49 Showers Dr Apt W314

City

Mountain View

State

CA

Zip Code

94040-1479

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 07 / 2019

Transaction ID : SA11AI.96249

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jascob, John, M., Mr.,

Mailing Address 7074 Jackman Rd
PO Box 253

City

Temperance

State

MI

Zip Code

48182-0253

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CCH Incorporated

Occupation (for Individual)

Editor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 11 / 2019

Transaction ID : SA11AI.96274

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Jones, Michael, D., , PE

Mailing Address 340 Savannah Ln

City
Gulf ShoresState
ALZip Code
36542-2776FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Michael D. Jones, PE

Occupation (for Individual)

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 29 / 2019

Transaction ID : SA11AI.96319

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Karnap, John, Russell, ,

Mailing Address 1000 S Ocean Blvd Apt 17P

City
Pompano BeachState
FLZip Code
33062-6651FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Karnap Associates, Inc

Occupation (for Individual)

Business Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 18 / 2019

Transaction ID : SA11AI.96340

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Keeler, Alexander, , ,

Mailing Address PO Box 11002

City
LoudonvilleState
NYZip Code
12211-0002FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Keeler Motor Car Co.

Occupation (for Individual)

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 23 / 2019

Transaction ID : SA11AI.96353

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kunz, Cary, Lee, Mr.,

Mailing Address 7946 Grenezay Rd

City
Wilmington

State
NC

Zip Code
28411-8367

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
General Electric

Occupation (for Individual)
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 31 / 2019

Transaction ID : SA11AI.96447

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lanahan, Charles, Alexander, ,

Mailing Address 121 Barnard Ave

City
Asheville

State
NC

Zip Code
28804-3225

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Trustscience USA Inc.

Occupation (for Individual)
Data Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 25 / 2019

Transaction ID : SA11AI.96472

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lessans, Martin, B., ,

Mailing Address 3927 Camp St

City
New Orleans

State
LA

Zip Code
70115-2654

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Retired

Occupation (for Individual)
Retired Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 30 / 2019

Transaction ID : SA11AI.96536

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lunsford, Everett, P., Mr.,

Mailing Address PO Box 5278

City
Williamsburg

State
VA

Zip Code
23188-5204

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 04 / 2019

Transaction ID : SA11AI.96605

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mary-Casanova, Frederique, , Mrs.,

Mailing Address 23 Rancho Dr

City
Sonoma

State
CA

Zip Code
95476-3601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 01 / 2019

Transaction ID : SA11AI.96666

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Moody, Jonathan, W., ,

Mailing Address 5739 Forbes Ave

City
Pittsburgh

State
PA

Zip Code
15217-1525

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NetApp

Occupation (for Individual)

Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 25 / 2019

Transaction ID : SA11AI.96809

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Munn, Mary, B., ,

Mailing Address 2105 Coldwater Bridge Ln

City
League City

State
TX

Zip Code
77573-5316

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UTMB

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
01 / 29 / 2019

Transaction ID : SA11AI.96856

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Phillips, John, , , Jr.

Mailing Address 441 Shadow Ln

City
Decatur

State
IL

Zip Code
62526-1144

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info Requested

Occupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
01 / 16 / 2019

Transaction ID : SA11AI.97011

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Potter, Pamela, E., Ms.,

Mailing Address 538 Spring Place Rd NE

City
White

State
GA

Zip Code
30184-2232

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Retired

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
01 / 02 / 2019

Transaction ID : SA11AI.97039

Amount of Each Receipt this Period

300.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1800.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Quinn, Carl, E., Mr.,

Mailing Address 225 Golden Oak Dr

City
Portola Vally

State
CA

Zip Code
94028-7762

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Zoox, Inc.

Occupation (for Individual)
Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 30 / 2019

Transaction ID : SA11AI.97077

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rosen, William, , ,

Mailing Address 3208 Cascadia Ave S

City
Seattle

State
WA

Zip Code
98144-7000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
alaskan copper

Occupation (for Individual)
manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 07 / 2019

Transaction ID : SA11AI.97192

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sanfratello, Samuel, , ,

Mailing Address 1026 Summitville Dr

City
Webster

State
NY

Zip Code
14580-4139

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)
Business Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 25 / 2019

Transaction ID : SA11AI.97246

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sedky, Cherif, , ,

Mailing Address 763 S Bates St

City
Birmingham

State
MI

Zip Code
48009-1955

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Private Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 01 / 2019

Transaction ID : SA11AI.97299

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Shaber, Joseph, , Mr.,

Mailing Address C/of John C. Lincoln
3514 E Indian School Rd

City
Phoenix

State
AZ

Zip Code
85018-5115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Sunshine Designs

Occupation (for Individual)

clothing wholesale

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33900.00

Date of Receipt

01 / 07 / 2019

Transaction ID : SA11AI.97314

Amount of Each Receipt this Period

33900.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sinda, John, Joseph, ,

Mailing Address PO Box 217

City
Fairfield

State
CA

Zip Code
94533-0021

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Pandamerica Imports, Inc.

Occupation (for Individual)

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 03 / 2019

Transaction ID : SA11AI.97361

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

34400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Taylor, Curry, B., Dr.,

Mailing Address 2813 Willow Ridge Dr

City
Garland

State
TX

Zip Code
75044-7843

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Texas Instruments

Occupation (for Individual)
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 16 / 2019

Transaction ID : SA11AI.97528

Amount of Each Receipt this Period

40.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wolff, Dick, , ,

Mailing Address 1260 Thompson Ave

City
Napa

State
CA

Zip Code
94558-5411

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Retired

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 08 / 2019

Transaction ID : SA11AI.97796

Amount of Each Receipt this Period

2000.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2040.00

91392.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 98

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Chastain, Michael, E., ,

Mailing Address 402 Meadow Oaks Dr

City
Dripping Springs

State
TX

Zip Code
78620-4502

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 30 / 2019

Transaction ID : SA17.95448

Amount of Each Receipt this Period

4000.00

☐ Memo Item

Headquarters Account - Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hillhouse, John, Loudon, , III

Mailing Address 712 29th St S Ste A-3

City
Birmingham

State
AL

Zip Code
35233-2810

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Ruffner Management, Inc

Occupation (for Individual)

Builder

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 18 / 2019

Transaction ID : SA17.96164

Amount of Each Receipt this Period

250.00

☐ Memo Item

Headquarters Account - Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ingraham, Irving, , , Jr.

Mailing Address 115 Federal St

City
Salem

State
MA

Zip Code
01970-3241

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

North Shore Physicians Group

Occupation (for Individual)

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 04 / 2019

Transaction ID : SA17.96248

Amount of Each Receipt this Period

250.00

☐ Memo Item

Headquarters Account - Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 98
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Taylor, Curry, B., Dr.,

Mailing Address 2813 Willow Ridge Dr

City
Garland

State
TX

Zip Code
75044-7843

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Texas Instruments

Occupation (for Individual)
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 07 / 2019

Transaction ID : SA17.97527

Amount of Each Receipt this Period

200.00

☐ Memo Item

Headquarters Account - Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Trammell, Joel, T., Mr.,

Mailing Address 1620 Palomino Ridge Dr

City
Austin

State
TX

Zip Code
78733-6046

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
P180 Investments

Occupation (for Individual)
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 30 / 2019

Transaction ID : SA17.97598

Amount of Each Receipt this Period

500.00

☐ Memo Item

Headquarters Account - Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Vallandigham, Paul, K., ,

Mailing Address 43667 Walden Way

City
Hemet

State
CA

Zip Code
92544-5276

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Retired

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 31 / 2019

Transaction ID : SA17.97636

Amount of Each Receipt this Period

250.00

☐ Memo Item

Headquarters Account - Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

950.00

5450.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. A & D Cleaning Service, LLC

Mailing Address 2878 Ft. Scott Dr. #101

City
ArlingtonState
VAZip Code
22202-2347Purpose of Disbursement
Cleaning

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	7			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97876

Amount of Each Disbursement this Period

247.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amazon Cloud Services

Mailing Address 1200 12th Avenue South #1200

City
SeattleState
WAZip Code
98144-2734Purpose of Disbursement
Cloud Web Server

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.98119

Amount of Each Disbursement this Period

19.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address PO Box 582820 - MD766

City
TulsaState
OKZip Code
74158-2820Purpose of Disbursement
Travel-Air

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.98131

Amount of Each Disbursement this Period

850.81

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

247.50

TOTAL This Period (last page this line number only).....▶

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: **SB21B**

Transaction ID : **SB21B.98119**

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.98131**

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. B & B Duplicators

Mailing Address 818 18th Street NW LL15

City
WashingtonState
DCZip Code
20006Purpose of Disbursement
Non Candidate Party Printing and Mailing

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				1	0		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98070

Amount of Each Disbursement this Period

 1588.98☐ Memo Item

Full Name (Last, First, Middle Initial)

B. B & B Duplicators

Mailing Address 818 18th Street NW LL15

City
WashingtonState
DCZip Code
20006Purpose of Disbursement
Non Candidate Party Printing and Mailing Service

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				1	6		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97880

Amount of Each Disbursement this Period

 442.17☐ Memo Item

Full Name (Last, First, Middle Initial)

C. B & B Duplicators

Mailing Address 818 18th Street NW LL15

City
WashingtonState
DCZip Code
20006Purpose of Disbursement
Non Candidate Party Printing and Mailing

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				1	6		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98071

Amount of Each Disbursement this Period

 1764.50☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

 3795.65

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. BB&T - Branch Banking & Trust

Mailing Address 1717 King St

City
AlexandriaState
VAZip Code
22314-0000Purpose of Disbursement
Interest

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.98133

Amount of Each Disbursement this Period

367.88

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. BB&T - Branch Banking & Trust

Mailing Address 1717 King St

City
AlexandriaState
VAZip Code
22314-0000Purpose of Disbursement
Credit Card Payment

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	7			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98072

Amount of Each Disbursement this Period

4963.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BB&T - Branch Banking & Trust

Mailing Address 1717 King St

City
AlexandriaState
VAZip Code
22314-0000Purpose of Disbursement
Credit Card Payment

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	9			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98073

Amount of Each Disbursement this Period

7293.09

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

12256.93

TOTAL This Period (last page this line number only)..... ►

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.98133

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. BB&T - Branch Banking & Trust

Mailing Address 1717 King St

City
AlexandriaState
VAZip Code
22314-0000Purpose of Disbursement
Bank Service Charge

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97882

Amount of Each Disbursement this Period

 219.38☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BB&T Loan Processing Center

Mailing Address PO Box 580050

City
CharlotteState
NCZip Code
28258-0050Purpose of Disbursement
Mortgage Payment

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	5			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97883

Amount of Each Disbursement this Period

 2900.21☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Better Termite & Pest Control, Inc.

Mailing Address 2647 Duke St

City
AlexandriaState
VAZip Code
22314-4593Purpose of Disbursement
Pest Control

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.98134

Amount of Each Disbursement this Period

 75.00☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 3119.59

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.98134

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Blackbaud, Inc.

Mailing Address P.O. Box 930256

City
AtlantaState
GAZip Code
31193-0256Purpose of Disbursement
Annual License Fee

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98074

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Blackbaud, Inc.

Mailing Address P.O. Box 930256

City
AtlantaState
GAZip Code
31193-0256Purpose of Disbursement
Annual License Fee

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	7			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98075

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Blackbaud, Inc.

Mailing Address P.O. Box 930256

City
AtlantaState
GAZip Code
31193-0256Purpose of Disbursement
Credit Card Processing Fee

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97921

Amount of Each Disbursement this Period

1425.20

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

16425.20

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Brierly, Elizabeth, C., ,

Mailing Address PO Box 611021

City
San JoseState
CAZip Code
95161-1021Purpose of Disbursement
Administrative Support Services & Writing

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	7		2	0	1	9

FEC Identification Number

C

Transaction ID : SB21B.98077

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Brierly, Elizabeth, C., ,

Mailing Address PO Box 611021

City
San JoseState
CAZip Code
95161-1021Purpose of Disbursement
Administrative Support Services & Writing

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	9		2	0	1	9

FEC Identification Number

C

Transaction ID : SB21B.98078

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Burns, Andrew, , ,

Mailing Address 2790 Xerxes Ave S Apt 3

City
MinneapolisState
MNZip Code
55416-0000Purpose of Disbursement
Affiliate Support Services

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	0		2	0	1	9

FEC Identification Number

C

Transaction ID : SB21B.98079

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Burns, Andrew, , ,

Mailing Address 2790 Xerxes Ave S Apt 3

City
MinneapolisState
MNZip Code
55416-0000Purpose of Disbursement
Affiliate Support Services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				1	7		2	0	1	9		

FEC Identification Number

C Transaction ID : **SB21B.98080**

Amount of Each Disbursement this Period

1320.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Burns, Andrew, , ,

Mailing Address 2790 Xerxes Ave S Apt 3

City
MinneapolisState
MNZip Code
55416-0000Purpose of Disbursement
Affiliate Support Services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				2	9		2	0	1	9		

FEC Identification Number

C Transaction ID : **SB21B.98081**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CareFirst BlueChoice, Inc.

Mailing Address PO Box 79749

City
BaltimoreState
MDZip Code
21279-0749Purpose of Disbursement
Employee health and Dental

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				0	1		2	0	1	9		

FEC Identification Number

C Transaction ID : **SB21B.97927**

Amount of Each Disbursement this Period

3700.51

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6020.51

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 98

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Cellular Services t/a DataJack

Mailing Address 14911 Quorum Drive #140

City
DallasState
TXZip Code
75254-0000Purpose of Disbursement
WiFi

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.98135

Amount of Each Disbursement this Period

1	9	9	8	0	0								
---	---	---	---	---	---	--	--	--	--	--	--	--	--

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. CiviHosting - TheOpenHost

Mailing Address 4272 Lakeridge Ct.

City
BloomfieldState
MIZip Code
48302-0000Purpose of Disbursement
Hosting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.98136

Amount of Each Disbursement this Period

6	3	0	0	0									
---	---	---	---	---	--	--	--	--	--	--	--	--	--

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Comcast

Mailing Address PO Box 3006

City
SoutheasternState
PAZip Code
19398-3006Purpose of Disbursement
Cable and Internet

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.98137

Amount of Each Disbursement this Period

2	1	6	1	9									
---	---	---	---	---	--	--	--	--	--	--	--	--	--

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0	0	0											
---	---	---	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: **SB21B**

Transaction ID : **SB21B.98135**

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.98136**

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.98137

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Custom Ink, Inc.

Mailing Address PO BOX 198399

City
AtlantaState
GAZip Code
30384-8399Purpose of Disbursement
LP Political Materials

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2018					

FEC Identification Number

C

Transaction ID : SB21B.98138

Amount of Each Disbursement this Period

1070.12

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Daugherty, Lauren, , ,

Mailing Address 5236 Lake Shore Dr

City
WacoState
TXZip Code
76710-1733Purpose of Disbursement
Employee Net Pay

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
01				09				2019					

FEC Identification Number

C

Transaction ID : SB21B.97929

Amount of Each Disbursement this Period

2253.86

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Daugherty, Lauren, , ,

Mailing Address 5236 Lake Shore Dr

City
WacoState
TXZip Code
76710-1733Purpose of Disbursement
Employee Net Pay

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
01				23				2019					

FEC Identification Number

C

Transaction ID : SB21B.97930

Amount of Each Disbursement this Period

2629.63

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4883.49

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Digital Ocean, Inc.

Mailing Address 101 6th Ave

City
New YorkState
NYZip Code
10013-0000Purpose of Disbursement
Software

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

001

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.98139

Amount of Each Disbursement this Period

5.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Dixon, Eric, D., Mr.,

Mailing Address 2643 Arlington Dr Apt 304

City
AlexandriaState
VAZip Code
22306-3618Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

001

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97931

Amount of Each Disbursement this Period

1701.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Dixon, Eric, D., Mr.,

Mailing Address 2643 Arlington Dr Apt 304

City
AlexandriaState
VAZip Code
22306-3618Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

001

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	3			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97932

Amount of Each Disbursement this Period

1701.75

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3403.50

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.98139

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Dominion Virginia Power

Mailing Address PO Box 26543

City
RichmondState
VAZip Code
23290-0001Purpose of Disbursement
Electric

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				1	0		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97933

Amount of Each Disbursement this Period

414.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Dunbar, Dominick, J., Mr.,

Mailing Address 75 Aquia Creek Rd

City
StaffordState
VAZip Code
22554-5528Purpose of Disbursement
Employee Net Pay

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				0	9		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97934

Amount of Each Disbursement this Period

336.02

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Dunbar, Dominick, J., Mr.,

Mailing Address 75 Aquia Creek Rd

City
StaffordState
VAZip Code
22554-5528Purpose of Disbursement
Employee Net Pay

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				2	3		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97935

Amount of Each Disbursement this Period

560.90

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1311.62

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 42 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Duracard, Inc.

Mailing Address 8800 Foundry St.

City
SavageState
MDZip Code
20763-9512Purpose of Disbursement
Membership Card Materials

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2018

FEC Identification Number

C Transaction ID : SB21B.98140

Amount of Each Disbursement this Period

886.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Edwards, Paula, , ,

Mailing Address 1200 G Street, N.W. Suite 800

City
WashingtonState
DCZip Code
20005-0000Purpose of Disbursement
Fec Filing and Amendments

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		09		2019

FEC Identification Number

C Transaction ID : SB21B.97936

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FastSpring Live

Mailing Address 801 Garden Street

City
Santa BarbaraState
CAZip Code
93101-0000Purpose of Disbursement
FB Video

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2018

FEC Identification Number

C Transaction ID : SB21B.98141

Amount of Each Disbursement this Period

14.99

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: **SB21B**

Transaction ID : **SB21B.98140**

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.98141**

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Fields, Richard, G., Mr.,

Mailing Address 1915 Alicante St

City
DavisState
CAZip Code
95618-6566Purpose of Disbursement
Press Release Writing and Editing

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	4			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98088

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Fields, Richard, G., Mr.,

Mailing Address 1915 Alicante St

City
DavisState
CAZip Code
95618-6566Purpose of Disbursement
Press Release Writing and Editing

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				1	0		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98089

Amount of Each Disbursement this Period

949.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Fields, Richard, G., Mr.,

Mailing Address 1915 Alicante St

City
DavisState
CAZip Code
95618-6566Purpose of Disbursement
Press Release Writing and Editing

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				1	7		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98090

Amount of Each Disbursement this Period

575.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2024.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 45 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Fields, Richard, G., Mr.,

Mailing Address 1915 Alicante St

City
DavisState
CAZip Code
95618-6566Purpose of Disbursement
Press Release Writing and Editing

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	9			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98091

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Medicare Company

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	8			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97942

Amount of Each Disbursement this Period

207.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Medicare Employee

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	8			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97943

Amount of Each Disbursement this Period

207.27

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

914.54

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 46 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Social Security Company

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	8			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97944

Amount of Each Disbursement this Period

886.26

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Social Security Employee

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	8			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97945

Amount of Each Disbursement this Period

886.26

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Federal Withholding

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	8			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97946

Amount of Each Disbursement this Period

1637.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3409.52

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 47 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Federal Unemployment

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	2			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97947

Amount of Each Disbursement this Period

86.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Medicare Company

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	2			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97948

Amount of Each Disbursement this Period

209.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Medicare Employee

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	2			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97948

Amount of Each Disbursement this Period

209.11

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

504.74

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 48 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Social Security Company

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	2			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97950

Amount of Each Disbursement this Period

894.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Social Security Employee

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	2			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97951

Amount of Each Disbursement this Period

894.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Federal Withholding

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	2			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97952

Amount of Each Disbursement this Period

1596.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3384.22

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. FP Mailing Solutions

Mailing Address PO Box 4510

City
Carol StreamState
ILZip Code
60197-4510Purpose of Disbursement
Postage & Meter Resets

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97953

Amount of Each Disbursement this Period

4950.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Giant Food - Peapod Delivery

Mailing Address 3131 Duke Street

City
AlexandriaState
VAZip Code
22314-0000Purpose of Disbursement
Office Supplies

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.98142

Amount of Each Disbursement this Period

320.45

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Google, Inc.

Mailing Address 1600 Amphitheatre Prky

City
Mt. ViewState
CAZip Code
94043-1351Purpose of Disbursement
Software

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.98143

Amount of Each Disbursement this Period

5.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

4950.00

TOTAL This Period (last page this line number only)..... ►

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: **SB21B**

Transaction ID : **SB21B.98142**

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.98143**

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 51 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Hall, Oliver, , ,

Mailing Address 1835 16th St NW #5

City
WashingtonState
DCZip Code
20009-0000Purpose of Disbursement
Legal Retainer

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98111

Amount of Each Disbursement this Period

4500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Harris, Tyler, John, ,

Mailing Address 6954 Gillis Way

City
GainesvilleState
VAZip Code
20155-1697Purpose of Disbursement
Employee Net Pay

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97957

Amount of Each Disbursement this Period

480.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Harris, Tyler, John, ,

Mailing Address 6954 Gillis Way

City
GainesvilleState
VAZip Code
20155-1697Purpose of Disbursement
Employee Net Pay

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	3			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97958

Amount of Each Disbursement this Period

795.59

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

5776.32

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 52 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Harris, Tyler, John, ,

Mailing Address 6954 Gillis Way

City
GainesvilleState
VAZip Code
20155-1697Purpose of Disbursement
Reimbursed Travel Exp see Memo -002

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	9		2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.97959**

Amount of Each Disbursement this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Colonial Parking, Inc

Mailing Address 1050 Thomas Jefferson St. NW #100

City
WashingtonState
DCZip Code
20007-0000Purpose of Disbursement
Parking

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	9		2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.97959**

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Hyatt Regency New Orleans

Mailing Address PO Box 919337

City
DallasState
TXZip Code
75391-9337Purpose of Disbursement
2018 Convention Room Food & AV

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	4		2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.98095**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1045.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 53 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Hyatt Regency New Orleans

Mailing Address PO Box 919337

City
DallasState
TXZip Code
75391-9337Purpose of Disbursement
2018 Convention Room Food & AV

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
01		09		2019

FEC Identification Number

C

Transaction ID : SB21B.98096

Amount of Each Disbursement this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hyatt Regency New Orleans

Mailing Address PO Box 919337

City
DallasState
TXZip Code
75391-9337Purpose of Disbursement
2018 Convention Room Food & AV

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
01		17		2019

FEC Identification Number

C

Transaction ID : SB21B.98097

Amount of Each Disbursement this Period

23323.13

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. IContact, Inc.

Mailing Address 5221 Paramount Parkway

City
MorrisvilleState
NCZip Code
27560-0000Purpose of Disbursement
Email Marketing

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12		31		2018

FEC Identification Number

C

Transaction ID : SB21B.98144

Amount of Each Disbursement this Period

749.70

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

48323.13

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.98144

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 55 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. IHG PLC

Mailing Address 3 Ravinia Dr., #1000

City
AtlantaState
GAZip Code
30346-2149Purpose of Disbursement
Staff Travel - Hotel

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2018			

FEC Identification Number

C

Transaction ID : SB21B.98145

Amount of Each Disbursement this Period

243.96

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. John Companies Collocation

Mailing Address 5482 Complex St #114

City
San DiegoState
CAZip Code
92123-0000Purpose of Disbursement
Mail List Server

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2018			

FEC Identification Number

C

Transaction ID : SB21B.98146

Amount of Each Disbursement this Period

836.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Johnston, Robert, S., Mr., III

Mailing Address PO Box 1633

City
Bel AirState
MDZip Code
21014-7633Purpose of Disbursement
Contract Labor Admin Services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
01			10			2019			

FEC Identification Number

C

Transaction ID : SB21B.98064

Amount of Each Disbursement this Period

523.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

523.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: **SB21B**

Transaction ID : **SB21B.98145**

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.98146**

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Johnston, Robert, S., Mr., III

Mailing Address PO Box 1633

City
Bel AirState
MDZip Code
21014-7633Purpose of Disbursement
Contract Labor Admin Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

001

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	7			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98065

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Johnston, Robert, S., Mr., III

Mailing Address PO Box 1633

City
Bel AirState
MDZip Code
21014-7633Purpose of Disbursement
Contract Labor Admin Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

001

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	9			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98066

Amount of Each Disbursement this Period

1160.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Konica Minolta Premier

Mailing Address PO Box 41602

City
PhiladelphiaState
PAZip Code
19101-1602Purpose of Disbursement
Copier Lease

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

001

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	7			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98084

Amount of Each Disbursement this Period

591.96

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2751.96

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 58 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Kraus, Robert, Steven, Prof.,

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	1	9		

Mailing Address 205 Yoakum Pkwy Unit 1111

City
AlexandriaState
VAZip Code
22304-3857Purpose of Disbursement
Employee Net Pay

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.97969

Amount of Each Disbursement this Period

1594.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kraus, Robert, Steven, Prof.,

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	3			2	0	1	9		

Mailing Address 205 Yoakum Pkwy Unit 1111

City
AlexandriaState
VAZip Code
22304-3857Purpose of Disbursement
Employee Net Pay

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.97970

Amount of Each Disbursement this Period

1671.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Luckey, Denise, , ,

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	0			2	0	1	9		

Mailing Address 1367 Hickory Hills Dr.

City
MurchisonState
TXZip Code
75778Purpose of Disbursement
Administrative Support & Graphic Design

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.98085

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

3766.44

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Luckey, Denise, , ,

Mailing Address 1367 Hickory Hills Dr.

City
MurchisonState
TXZip Code
75778Purpose of Disbursement
Administrative Support & Graphic Design

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	7			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98086

Amount of Each Disbursement this Period

 1000.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Luckey, Denise, , ,

Mailing Address 1367 Hickory Hills Dr.

City
MurchisonState
TXZip Code
75778Purpose of Disbursement
Administrative Support & Graphic Design

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	9			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98087

Amount of Each Disbursement this Period

 500.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft, Inc.

Mailing Address 548 Market St # 68514

City
San FranciscoState
CAZip Code
94104-0000Purpose of Disbursement
Staff Travel - Local

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.98148

Amount of Each Disbursement this Period

 40.29☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

 1500.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.98148

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 61 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Marriott Hotels

Mailing Address 1 Marriott Drive

City
WashingtonState
DCZip Code
20058-0000Purpose of Disbursement
Staff Travel - Hotel

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2018					

FEC Identification Number

C

Transaction ID : SB21B.98149

Amount of Each Disbursement this Period

2056.44

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Master Print, Inc.

Mailing Address PO Box 1467

City
NewingtonState
VAZip Code
22122-1467Purpose of Disbursement
Non Candidate Party Printing Service

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
01				02				2019					

FEC Identification Number

C

Transaction ID : SB21B.98092

Amount of Each Disbursement this Period

299.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Master Print, Inc.

Mailing Address PO Box 1467

City
NewingtonState
VAZip Code
22122-1467Purpose of Disbursement
Non Candidate Party Printing Service

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
01				10				2019					

FEC Identification Number

C

Transaction ID : SB21B.98093

Amount of Each Disbursement this Period

892.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1191.98

TOTAL This Period (last page this line number only).....▶

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.98149

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 63 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Master Print, Inc.

Mailing Address PO Box 1467

City
NewingtonState
VAZip Code
22122-1467Purpose of Disbursement
Non Candidate Party Printing Service

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	7			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98094

Amount of Each Disbursement this Period

1266.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. McAfee, Inc.

Mailing Address 2821 Mission College Blvd.

City
Santa ClaraState
CAZip Code
95054-0000Purpose of Disbursement
Software

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.98150

Amount of Each Disbursement this Period

99.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Mears, Jessica, , Ms.,Mailing Address 1600 Prince St
Apt 104City
AlexandriaState
VAZip Code
22314-0000Purpose of Disbursement
Employee Net Pay

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97975

Amount of Each Disbursement this Period

1673.69

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2940.39

TOTAL This Period (last page this line number only).....▶

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.98150

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 65 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mears, Jessica, , Ms.,

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	1				2	3						2	0	1	9

Mailing Address 1600 Prince St
Apt 104City
AlexandriaState
VAZip Code
22314-0000Purpose of Disbursement
Employee Net Pay

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.97980

Amount of Each Disbursement this Period

1673.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mears, Jessica, , Ms.,

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	1					2						2	0	1	9

Mailing Address 1600 Prince St
Apt 104City
AlexandriaState
VAZip Code
22314-0000Purpose of Disbursement
Reimbursed Travel Exp see Memo -002

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.97977

Amount of Each Disbursement this Period

30.02

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	1					2						2	0	1	9

Mailing Address 1455 Market St Fl 4

City
San FranciscoState
CAZip Code
94103-0000Purpose of Disbursement
Travel - Local

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.97977

Amount of Each Disbursement this Period

30.02

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1703.72

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 66 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Merchant Services

Mailing Address 890 Mountain Ave

City
New ProvidenceState
NJZip Code
07974-0000Purpose of Disbursement
Merch Processing Fee

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	9

FEC Identification Number

C

Transaction ID : SB21B.97981

Amount of Each Disbursement this Period

402.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Miller's Office Products, Inc.

Mailing Address PO Box 1537

City
NewingtonState
VAZip Code
22122-1537Purpose of Disbursement
Office Supplies

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	7		2	0	1	9

FEC Identification Number

C

Transaction ID : SB21B.97983

Amount of Each Disbursement this Period

182.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MyWikis Holdings

Mailing Address 1155 Union Cir #309088

City
DentonState
TXZip Code
76203-5017Purpose of Disbursement
Wiki Hosting Service

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	7		2	0	1	9

FEC Identification Number

C

Transaction ID : SB21B.97984

Amount of Each Disbursement this Period

310.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

895.19

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 67 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Northern Nye Printing

Mailing Address 3115 N Robinson Dr.

City
WacoState
TXZip Code
76706-0000Purpose of Disbursement
LP Printing and Mailing Non Candidate

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2018					

FEC Identification Number

C**Transaction ID : SB21B.98151**

Amount of Each Disbursement this Period

97.43

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. One Dog Solutions

Mailing Address 7360 Landeu Dr.

City
BloomingtonState
MNZip Code
55438-0000Purpose of Disbursement
Administrative Support & Graphic Design

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
01				10				2019					

FEC Identification Number

C**Transaction ID : SB21B.97985**

Amount of Each Disbursement this Period

309.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. OnTimeTelecom, LLC.

Mailing Address 235 Apollo Beach Blvd, Suite 307

City
Apollo BeachState
FLZip Code
33572-0000Purpose of Disbursement
Text Messaging

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2018					

FEC Identification Number

C**Transaction ID : SB21B.98152**

Amount of Each Disbursement this Period

19.99

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

309.60

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: **SB21B**

Transaction ID : **SB21B.98151**

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.98152**

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 69 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Oquirrh Mountain Strategies, LLC

Mailing Address 8831 W State Highway

City
CoppertonState
UTZip Code
84006-0000Purpose of Disbursement
Candidate Recruitment & Support Services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	7			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97987

Amount of Each Disbursement this Period

1373.91

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PayPal Merchant Services

Mailing Address 2211 N. First St.

City
San JoseState
CAZip Code
95131-0000Purpose of Disbursement
Merchant Fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.98153

Amount of Each Disbursement this Period

226.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. PayPal Merchant Services

Mailing Address 2211 N. First St.

City
San JoseState
CAZip Code
95131-0000Purpose of Disbursement
Merch Processing Fee

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97988

Amount of Each Disbursement this Period

3569.93

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4943.84

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.98153

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 71 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Pazell, Jordan, A., ,

Mailing Address 8831 W State Hwy

City
CoppertonState
UTZip Code
84006-0000Purpose of Disbursement
Employee Net Pay

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	9		2	0	1	9

FEC Identification Number

C

Transaction ID : SB21B.97989

Amount of Each Disbursement this Period

1387.77

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Pazell, Jordan, A., ,

Mailing Address 8831 W State Hwy

City
CoppertonState
UTZip Code
84006-0000Purpose of Disbursement
Employee Net Pay

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	3		2	0	1	9

FEC Identification Number

C

Transaction ID : SB21B.97990

Amount of Each Disbursement this Period

556.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PNC Visa Card

Mailing Address P.O. Box 856176

City
LouisvilleState
KYZip Code
40285-6176Purpose of Disbursement
PNC Visa Card Payment

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	9

FEC Identification Number

C

Transaction ID : SB21B.97993

Amount of Each Disbursement this Period

271.24

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2215.56

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Postmaster - Alexandria BRM

Mailing Address 2226 Duke St.

City
AlexandriaState
VAZip Code
22314-0000Purpose of Disbursement
Business Reply Mail Postage -003

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	1			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.97999

Amount of Each Disbursement this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Postmaster - USPS HQ

Mailing Address 475 L'Enfant Plaza SW #4446

City
WashingtonState
DCZip Code
20260-4446Purpose of Disbursement
Postage

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.98154

Amount of Each Disbursement this Period

384.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. QuickBooks Payroll Service

Mailing Address PO Box 30015

City
RenoState
NVZip Code
89520-3015Purpose of Disbursement
Payroll Processing Fee

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	7			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98001

Amount of Each Disbursement this Period

78.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

828.25

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.98154

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 74 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. QuickBooks Payroll Service

Mailing Address PO Box 30015

City
RenoState
NVZip Code
89520-3015Purpose of Disbursement
Payroll Processing Fee

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	2			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98002

Amount of Each Disbursement this Period

26.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Round House Sq UOA

Mailing Address 6231 Leesburg Pk #100

City
Falls ChurchState
VAZip Code
22044-0000Purpose of Disbursement
Association Fee

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	1			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98003

Amount of Each Disbursement this Period

219.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Schultz, Cara, , ,

Mailing Address 30 Walden St.

City
BurnsvilleState
MNZip Code
55337-0000Purpose of Disbursement
Candidate Recruitment & Support Services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	0			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98100

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

745.55

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Southwest

Mailing Address PO Box 36662

City
DallasState
TXZip Code
75235-6662Purpose of Disbursement
Travel-Air

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2018					

FEC Identification Number

C

Transaction ID : SB21B.98155

Amount of Each Disbursement this Period

475.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Speedy Buttons, Inc.

Mailing Address 3269 19th St NW

City
RochesterState
MNZip Code
55901-0000Purpose of Disbursement
LP Political Materials

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2018					

FEC Identification Number

C

Transaction ID : SB21B.98156

Amount of Each Disbursement this Period

870.52

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. StorQuest

Mailing Address 16980 Cottonwood Drive

City
ParkerState
COZip Code
80134-0000Purpose of Disbursement
Storage

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2018					

FEC Identification Number

C

Transaction ID : SB21B.98157

Amount of Each Disbursement this Period

287.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: **SB21B**

Transaction ID : **SB21B.98155**

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.98156**

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB21B
Transaction ID : SB21B.98157

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

Form/Schedule:
Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 78 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Tadpole Collective

Mailing Address 353 W 48th St #328

City
New YorkState
NYZip Code
10036-0000Purpose of Disbursement
Database

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	4			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98201

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Tadpole Collective

Mailing Address 353 W 48th St #328

City
New YorkState
NYZip Code
10036-0000Purpose of Disbursement
Database

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	0			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98202

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Tadpole Collective

Mailing Address 353 W 48th St #328

City
New YorkState
NYZip Code
10036-0000Purpose of Disbursement
Database

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	7			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98203

Amount of Each Disbursement this Period

1500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 79 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Thexton, Matthew, A., Mr.,

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	1	9		

Mailing Address PO Box 6232

City
Falls ChurchState
VAZip Code
22040-6232Purpose of Disbursement
Employee Net Pay

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98011

Amount of Each Disbursement this Period

889.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Thexton, Matthew, A., Mr.,

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	3			2	0	1	9		

Mailing Address PO Box 6232

City
Falls ChurchState
VAZip Code
22040-6232Purpose of Disbursement
Employee Net Pay

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98012

Amount of Each Disbursement this Period

880.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Typeform c/of WPS, Inc.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	1			2	0	1	8		

Mailing Address P.O. Box 81226

City
SeattleState
WAZip Code
98108-1226Purpose of Disbursement
Forms

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98158

Amount of Each Disbursement this Period

35.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1769.78

TOTAL This Period (last page this line number only).....▶

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.98158

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 81 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. ULine, Inc.

Mailing Address PO Box 88741

City
ChicagoState
ILZip Code
60680-1741Purpose of Disbursement
Shipping Supplies

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2018					

FEC Identification Number

C

Transaction ID : SB21B.98159

Amount of Each Disbursement this Period

141.37

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UStream.TV

Mailing Address 410 Townsend St

City
San FranciscoState
CAZip Code
94107-0000Purpose of Disbursement
Video Streaming

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2018					

FEC Identification Number

C

Transaction ID : SB21B.98160

Amount of Each Disbursement this Period

99.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Vanguard - Ascensus

Mailing Address PO Box 28067

City
New YorkState
NYZip Code
10087-8067Purpose of Disbursement
LP 401k Contributions & Co Match

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
01				28				2019					

FEC Identification Number

C

Transaction ID : SB21B.98018

Amount of Each Disbursement this Period

1900.05

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1900.05

: 97 `A-G79 @ @ B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: **SB21B**

Transaction ID : **SB21B.98159**

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.98160**

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 83 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Virginia Dept. of Taxation

Mailing Address PO Box 26644

City
RichmondState
VAZip Code
23261-6644Purpose of Disbursement
VA - Withholding

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	8			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98021

Amount of Each Disbursement this Period

558.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Virginia Dept. of Taxation

Mailing Address PO Box 26644

City
RichmondState
VAZip Code
23261-6644Purpose of Disbursement
VA - Unemployment Company

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	2			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98022

Amount of Each Disbursement this Period

39.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Virginia Dept. of Taxation

Mailing Address PO Box 26644

City
RichmondState
VAZip Code
23261-6644Purpose of Disbursement
VA - Withholding

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	2			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.98023

Amount of Each Disbursement this Period

596.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1193.69

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 84 OF 98

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Windstream - Broadview

Mailing Address PO Box 9242

City
UniondaleState
NYZip Code
11555-9242Purpose of Disbursement
Phone Service

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2018			

FEC Identification Number

C

Transaction ID : SB21B.98161

Amount of Each Disbursement this Period

1111.75

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Windstream - Broadview

Mailing Address PO Box 9242

City
UniondaleState
NYZip Code
11555-9242Purpose of Disbursement
Phone System and Usage

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
01			17			2019			

FEC Identification Number

C

Transaction ID : SB21B.98101

Amount of Each Disbursement this Period

1045.71

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1045.71

TOTAL This Period (last page this line number only).....▶

161020.17

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.98161

Ultimate vendor for BB&T Visa payments 1/17/2019 in the amount of \$4,963.84. and 1/29/2019 in the amount of \$7,293.09. Unable to link ultimate vendor to debt payment entry using FECfile.

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 86 OF 98

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

B & B Duplicators

Nature of Debt (Purpose):

Non Candidate Party Printing Service

Mailing Address 818 18th Street NW LL15

City

Washington

State

DC

Zip Code

20006

Outstanding Balance Beginning This Period

1764.50

Transaction ID : SD10.94926

Amount Incurred This Period

0.00

Payment This Period

1764.50

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

B & B Duplicators

Nature of Debt (Purpose):

Non Candidate Party Printing Service

Mailing Address 818 18th Street NW LL15

City

Washington

State

DC

Zip Code

20006

Outstanding Balance Beginning This Period

1588.98

Transaction ID : SD10.94927

Amount Incurred This Period

0.00

Payment This Period

1588.98

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

B & B Duplicators

Nature of Debt (Purpose):

Non Candidate Party Printing Service

Mailing Address 818 18th Street NW LL15

City

Washington

State

DC

Zip Code

20006

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98102

Amount Incurred This Period

1139.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

1139.50

1) **SUBTOTALS** This Period This Page (optional)..... ►

1139.50

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 87 OF 98

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

BB&T - Branch Banking & Trust

Nature of Debt (Purpose):
Credit Card Charges

Mailing Address 1717 King St

City

Alexandria

State

VA

Zip Code

22314-0000

Outstanding Balance Beginning This Period

12256.93

Transaction ID : SD10.94928

Amount Incurred This Period

0.00

Payment This Period

12256.93

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

BB&T - Branch Banking & Trust

Nature of Debt (Purpose):
Credit Card Charges

Mailing Address 1717 King St

City

Alexandria

State

VA

Zip Code

22314-0000

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98103

Amount Incurred This Period

12724.33

Payment This Period

0.00

Outstanding Balance at Close of This Period

12724.33

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Bigeye Direct, Inc.

Nature of Debt (Purpose):
Non Candidate Party Printing Service

Mailing Address PO Box 710865

City

Oak Hill

State

VA

Zip Code

20171-0865

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98104

Amount Incurred This Period

1768.71

Payment This Period

0.00

Outstanding Balance at Close of This Period

1768.71

1) SUBTOTALS This Period This Page (optional)..... ►

14493.04

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 88 OF 98

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blackbaud, Inc.Nature of Debt (Purpose):
Annual License Fee

Mailing Address P.O. Box 930256

City
AtlantaState
GAZip Code
31193-0256

Outstanding Balance Beginning This Period

27702.33

Transaction ID : SD10.94929

Amount Incurred This Period

0.00

Payment This Period

15000.00

Outstanding Balance at Close of This Period

12702.33

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blackbaud, Inc.Nature of Debt (Purpose):
Merchant Fee

Mailing Address P.O. Box 930256

City
AtlantaState
GAZip Code
31193-0256

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98105

Amount Incurred This Period

30.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

30.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Brierly, Elizabeth, C., ,Nature of Debt (Purpose):
Administrative Support Services/Editing

Mailing Address PO Box 611021

City
San JoseState
CAZip Code
95161-1021

Outstanding Balance Beginning This Period

11598.34

Transaction ID : SD10.94931

Amount Incurred This Period

0.00

Payment This Period

2000.00

Outstanding Balance at Close of This Period

9598.34

1) **SUBTOTALS** This Period This Page (optional)..... ►

22330.67

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 89 OF 98

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Brierly, Elizabeth, C., ,

Nature of Debt (Purpose):

Administrative Support Services/Editing

Mailing Address PO Box 611021

City

San Jose

State

CA

Zip Code

95161-1021

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98106

Amount Incurred This Period

1143.33

Payment This Period

0.00

Outstanding Balance at Close of This Period

1143.33

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Burns, Andrew, , ,

Nature of Debt (Purpose):

Affiliate Support Services

Mailing Address 2790 Xerxes Ave S Apt 3

City

Minneapolis

State

MN

Zip Code

55416-0000

Outstanding Balance Beginning This Period

6140.00

Transaction ID : SD10.94935

Amount Incurred This Period

0.00

Payment This Period

2820.00

Outstanding Balance at Close of This Period

3320.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Burns, Andrew, , ,

Nature of Debt (Purpose):

Affiliate Support Services

Mailing Address 2790 Xerxes Ave S Apt 3

City

Minneapolis

State

MN

Zip Code

55416-0000

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98107

Amount Incurred This Period

2160.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2160.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

6623.33

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 90 OF 98

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Commonwealth Digital Office Solutions

Nature of Debt (Purpose):

Copier Maintenance and Supplies

Mailing Address 21205 Ridgetop Circle

City
SterlingState
VAZip Code
20166-6501

Outstanding Balance Beginning This Period

848.71

Transaction ID : SD10.94945

Amount Incurred This Period

0.00

Payment This Period

28.72

Outstanding Balance at Close of This Period

819.99

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Commonwealth Digital Office Solutions

Nature of Debt (Purpose):

Copier Maintenance and Supplies

Mailing Address 21205 Ridgetop Circle

City
SterlingState
VAZip Code
20166-6501

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98108

Amount Incurred This Period

346.71

Payment This Period

0.00

Outstanding Balance at Close of This Period

346.71

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CSC - Corp. Services Co.

Nature of Debt (Purpose):

Corporate Services

Mailing Address PO Box 13397

City
PhiladelphiaState
PAZip Code
19101-3397

Outstanding Balance Beginning This Period

762.00

Transaction ID : SD10.94946

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

762.00

1) SUBTOTALS This Period This Page (optional)..... ►

1928.70

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 91 OF 98

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Fields, Richard, G., Mr.,Nature of Debt (Purpose):
Press Release Editing

Mailing Address 1915 Alicante St

City
DavisState
CAZip Code
95618-6566

Outstanding Balance Beginning This Period

3588.00

Transaction ID : SD10.94947

Amount Incurred This Period

0.00

Payment This Period

2524.00

Outstanding Balance at Close of This Period

1064.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Fields, Richard, G., Mr.,Nature of Debt (Purpose):
Press Release Editing

Mailing Address 1915 Alicante St

City
DavisState
CAZip Code
95618-6566

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98109

Amount Incurred This Period

460.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

460.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gura, PLLCNature of Debt (Purpose):
Legal Expenses

Mailing Address 906 Price St, Ste 107

City
AlexandriaState
VAZip Code
22314-0000

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98110

Amount Incurred This Period

5000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

6524.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 92 OF 98

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hall, Oliver, , ,

Nature of Debt (Purpose):
Legal Retainer

Mailing Address 1835 16th St NW #5

City
WashingtonState
DCZip Code
20009-0000

Outstanding Balance Beginning This Period

4500.00

Transaction ID : SD10.94949

Amount Incurred This Period

0.00

Payment This Period

4500.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hall, Oliver, , ,

Nature of Debt (Purpose):
Legal Retainer

Mailing Address 1835 16th St NW #5

City
WashingtonState
DCZip Code
20009-0000

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98112

Amount Incurred This Period

4500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hyatt Regency New Orleans

Nature of Debt (Purpose):
Hyatt Regency 2018 Convention Expense

Mailing Address PO Box 919337

City
DallasState
TXZip Code
75391-9337

Outstanding Balance Beginning This Period

56265.42

Transaction ID : SD10.78370

Amount Incurred This Period

0.00

Payment This Period

49323.13

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

4500.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SD10

Transaction ID : SD10.78370

(Current invoice amount of 6942.29 from a balance of 6942.29 has been settled through issuance of customer credits and adjustment of charges.

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 94 OF 98

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Johnston, Robert, S., Mr., III

Nature of Debt (Purpose):

Contract Labor Administrative Services

Mailing Address PO Box 1633

City

Bel Air

State

MD

Zip Code

21014-7633

Outstanding Balance Beginning This Period

2683.00

Transaction ID : SD10.94950

Amount Incurred This Period

0.00

Payment This Period

2683.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Johnston, Robert, S., Mr., III

Nature of Debt (Purpose):

Contract Administrative Support Services

Mailing Address PO Box 1633

City

Bel Air

State

MD

Zip Code

21014-7633

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98113

Amount Incurred This Period

1350.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1350.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Johnston, Robert, S., Mr., III

Nature of Debt (Purpose):

Contract Administrative Support Services

Mailing Address PO Box 1633

City

Bel Air

State

MD

Zip Code

21014-7633

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98114

Amount Incurred This Period

2160.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2160.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

3510.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Konica Minolta Premier

Nature of Debt (Purpose):
Copier Lease

Mailing Address PO Box 41602

City

Philadelphia

State

PA

Zip Code

19101-1602

Outstanding Balance Beginning This Period

591.96

Transaction ID : SD10.94951

Amount Incurred This Period

0.00

Payment This Period

591.96

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Konica Minolta Premier

Nature of Debt (Purpose):
Copier Lease

Mailing Address PO Box 41602

City

Philadelphia

State

PA

Zip Code

19101-1602

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98115

Amount Incurred This Period

594.43

Payment This Period

0.00

Outstanding Balance at Close of This Period

594.43

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Luckey, Denise, , ,

Nature of Debt (Purpose):
Administrative Support Services; Editing

Mailing Address 1367 Hickory Hills Dr.

City

Murchison

State

TX

Zip Code

75778

Outstanding Balance Beginning This Period

2707.25

Transaction ID : SD10.94952

Amount Incurred This Period

0.00

Payment This Period

2000.00

Outstanding Balance at Close of This Period

707.25

1) SUBTOTALS This Period This Page (optional)..... ►

1301.68

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Master Print, Inc.

Nature of Debt (Purpose):

Non Candidate Party Printing Services

Mailing Address PO Box 1467

City

Newington

State

VA

Zip Code

22122-1467

Outstanding Balance Beginning This Period

2858.20

Transaction ID : SD10.94953

Amount Incurred This Period

0.00

Payment This Period

2458.68

Outstanding Balance at Close of This Period

399.52

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Master Print, Inc.

Nature of Debt (Purpose):

Non Candidate Party Printing Services

Mailing Address PO Box 1467

City

Newington

State

VA

Zip Code

22122-1467

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98116

Amount Incurred This Period

556.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

556.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Master Print, Inc.

Nature of Debt (Purpose):

Non Candidate Party Printing Services

Mailing Address PO Box 1467

City

Newington

State

VA

Zip Code

22122-1467

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98117

Amount Incurred This Period

579.82

Payment This Period

0.00

Outstanding Balance at Close of This Period

579.82

1) **SUBTOTALS** This Period This Page (optional)..... ►

1535.84

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Schultz, Cara, , ,

Nature of Debt (Purpose):

Recruitment and Support Service

Mailing Address 30 Walden St.

City

Burnsville

State

MN

Zip Code

55337-0000

Outstanding Balance Beginning This Period

6930.00

Transaction ID : SD10.94956

Amount Incurred This Period

0.00

Payment This Period

500.00

Outstanding Balance at Close of This Period

6430.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Stigler Printing

Nature of Debt (Purpose):

Non Candidate Party Printing

Mailing Address Box 549 - 204 S. Broadway

City

Stigler

State

OK

Zip Code

74462-0000

Outstanding Balance Beginning This Period

4627.62

Transaction ID : SD10.94957

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4627.62

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Tadpole Collective

Nature of Debt (Purpose):

CiviCRM Database Project

Mailing Address 353 W 48th St #328

City

New York

State

NY

Zip Code

10036-0000

Outstanding Balance Beginning This Period

5000.00

Transaction ID : SD10.94958

Amount Incurred This Period

0.00

Payment This Period

5000.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

11057.62

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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(check only one)
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☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Windstream - Broadview

Nature of Debt (Purpose):
Telephone system

Mailing Address PO Box 9242

City

Uniondale

State

NY

Zip Code

11555-9242

Outstanding Balance Beginning This Period

1045.71

Transaction ID : SD10.94963

Amount Incurred This Period

0.00

Payment This Period

1045.71

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Windstream - Broadview

Nature of Debt (Purpose):
Telephone system

Mailing Address PO Box 9242

City

Uniondale

State

NY

Zip Code

11555-9242

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98118

Amount Incurred This Period

1084.06

Payment This Period

0.00

Outstanding Balance at Close of This Period

1084.06

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

1084.06

2) TOTALS This Period (last page this line number only)..... ►

76028.44

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

76028.44